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CONFIRMATION NO. 6391

SERIAL NUMBER 09/475,499	FILING OR 371(c) DATE 12/30/1999 RULE	CLASS 422	GROUP ART UNIT 1764	ATTORNEY DOCKET NO.	
APPLICANTS THOMAS D. MERRITT, MIAMI, FL; <i>JDL</i>					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/14/2000					
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Jennifer Leung</i> <i>JDL</i> Examiner's Signature Initials	STATE OR COUNTRY FL	SHEETS DRAWING 2	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
ADDRESS Thomas Merritt 2027 Thomas Street Hollywood, FL33020					
TITLE FLUE GAS CONVERSION APPARATUS AND METHOD					
FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			

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APPLICANT

THOMAS D. MERRITT, MIAMI, FL.

CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***
VERIFIED

FOREIGN APPLICATIONS***
VERIFIED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 2 3	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
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TITLE

FLUE GAS CONVERSION APPARATUS AND METHOD

FILING FEE RECEIVED \$345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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